

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Americans for Police and Trooper Safety

ADDRESS (number and street)

PO Box 5339

Check if different
than previously
reported. (ACC)

Santa Monica

CA

90409

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00656314

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

[]

(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

[]

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Kutac, Paul, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Kutac, Paul, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Americans for Police and Trooper Safety

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 04 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y 06 / 30 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2018		2101.02
(b) Cash on Hand at Beginning of Reporting Period.....	183405.67	
(c) Total Receipts (from Line 19)	1048409.04	2722485.84
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1231814.71	2724586.86
7. Total Disbursements (from Line 31).....	954971.88	2447744.03
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	276842.83	276842.83
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Americans for Police and Trooper Safety

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2018

To:

M M / D D / Y Y Y Y
06 / 30 / 2018
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

14960.00

16010.00

(ii) Unitemized

1033448.70

2706468.18

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

1048408.70

2722478.18

(b) Political Party Committees

.00

.00

(c) Other Political Committees

(such as PACs).....

.00

.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

1048408.70

2722478.18

12. Transfers From Affiliated/Other

Party Committees.....

.00

.00

13. All Loans Received

.00

.00

14. Loan Repayments Received.....

.00

.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

.00

7.16

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

.00

.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

.34

.50

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

.00

.00

(b) Levin Funds (from Schedule H5)

.00

.00

(c) Total Transfers (add 18(a) and 18(b))..

.00

.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

1048409.04

2722485.84

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

1048409.04

2722485.84

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	.00	.00
(ii) Non-Federal Share.....	.00	.00
(b) Other Federal Operating Expenditures	949971.88	2442744.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	949971.88	2442744.03
22. Transfers to Affiliated/Other Party Committees.....	.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	.00	.00
24. Independent Expenditures (use Schedule E)	5000.00	5000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	.00	.00
26. Loan Repayments Made.....	.00	.00
27. Loans Made.....	.00	.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	.00	.00
29. Other Disbursements (Including Non-Federal Donations).....	.00	.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	.00	.00
(ii) "Levin" Share.....	.00	.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	.00	.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	.00	.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	954971.88	2447744.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	954971.88	2447744.03

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1048408.70	2722478.18
34. Total Contribution Refunds (from Line 28(d)) .....	.00	.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1048408.70	2722478.18
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	949971.88	2442744.03
37. Offsets to Operating Expenditures (from Line 15, page 3).....	.00	7.16
38. Net Operating Expenditures (subtract Line 37 from Line 36)	949971.88	2442736.87

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 129

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ahuruonye, Derrick, , ,

Mailing Address 1530 46th Ave

City

San Francisco

State

CA

Zip Code

94122

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

hca

Occupation (for Individual)

bookkeeper

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 22 / 2018

Transaction ID : SA11Ai-CN55593

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ali, Kaniwar W, , ,

Mailing Address PO Box 1580

City

Mascot

State

TN

Zip Code

37806

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

Dispatch

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 21 / 2018

Transaction ID : SA11Ai-CN59925

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Antani, Sunil, , ,

Mailing Address 888 Biscayne Blvd Apt 5602

City

Miami

State

FL

Zip Code

33132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

N/A

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 21 / 2018

Transaction ID : SA11Ai-CN63440

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

750.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 129

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Atoyan, Akop, , ,

Mailing Address 4944 Windplay Dr Ste 115

City

El Dorado Hills

State

CA

Zip Code

95762

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Realtor

Occupation (for Individual)

Faze One Real Estate Inc

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2018

Transaction ID : SA11Ai-CN52130

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brumder, Herbert, , ,

Mailing Address 6100 Brumder Rd

City

Hartland

State

WI

Zip Code

53029

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2018

Transaction ID : SA11Ai-CN54281

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Camacho, Carlos, , ,

Mailing Address 80 Rountree Rd

City

Riverdale

State

GA

Zip Code

30274

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CONTRUCTON

Occupation (for Individual)

SELF EMPLOYED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 09 / 2018

Transaction ID : SA11Ai-CN14192

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Carter, Travis K, , ,

Mailing Address 26922 Dumbarton Ct

City
ElkhartState
INZip Code
46514FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
naOccupation (for Individual)
retired

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 19 / 2018

Transaction ID : SA11Ai-CN71360

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clemons, Richard P, , ,

Mailing Address 588 Sugar Valley Trl SE

City
ConyersState
GAZip Code
30094FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Landscape ContractorOccupation (for Individual)
SELFEMPLOYED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA11Ai-CN58695

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dowd, Owen H, , ,

Mailing Address 18 Field Point Rd

City
DarienState
CTZip Code
6820FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Owner & CEOOccupation (for Individual)
OJ Flight Industry

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2018

Transaction ID : SA11Ai-CN56660

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

810.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Eberl, Grace E., , ,

Mailing Address 1794 Cold Springs Gulch Rd

City
GoldenState
COZip Code
80401FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 20 / 2018

Transaction ID : SA11Ai-CN67934

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Elliott, Jonathan, , ,

Mailing Address 1516 Crest Park Ct

City
BethlehemState
PAZip Code
18015FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IT TechOccupation (for Individual)
Comcast

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 20 / 2018

Transaction ID : SA11Ai-CN72116

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Flaherty, Karen, , ,

Mailing Address PO Box 587

City
San MartinState
CAZip Code
95046FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Supervising plan review specialistOccupation (for Individual)
City of San Diego

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2018

Transaction ID : SA11Ai-CN65333

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

800.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Foster, Gretchen, , ,

Mailing Address 4612 142nd PI SE

City
Bellevue

State
WA

Zip Code
98006

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2018

Transaction ID : SA11Ai-CN62937

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Garcia, Leonardo R, , ,

Mailing Address PO Box 462

City
Denver City

State
TX

Zip Code
79323

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Company Owner

Occupation (for Individual)
L&G Services

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2018

Transaction ID : SA11Ai-CN56995

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gonzalez, Nuncia M, , ,

Mailing Address 131 Bridge St

City
Salem

State
MA

Zip Code
1970

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Program Director

Occupation (for Individual)
Adult Daycare Center

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA11Ai-CN58737

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 129

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Goodman, Joyce, , ,

Mailing Address 124 Old Tannery Rd

City
MonroeState
CTZip Code
6468FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 14 / 2018

Transaction ID : SA11Ai-CN64268

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goodrum, Richard, , ,

Mailing Address 922 W Houston St

City
HighlandsState
TXZip Code
77562FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
SELF-EMPLOYED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2018

Transaction ID : SA11Ai-CN79360

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Grant, Paul, , ,

Mailing Address 2 Surfside Dr

City
NantucketState
MAZip Code
2554FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CARPENTEROccupation (for Individual)
PATRICK DOUBLE PACE

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA11Ai-CN61971

Amount of Each Receipt this Period

550.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1100.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Green li, David S, , ,

Mailing Address 3430 Cintonya Dr Apt 168

City
Erlanger

State
KY

Zip Code
41018

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 04 / 2018

Transaction ID : SA11Ai-CN8397

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Henson, Matthew, , ,

Mailing Address 9412 Fireside Dr

City
Shreveport

State
LA

Zip Code
71118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AIR FORCE RESERVES

Occupation (for Individual)
USA

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2018

Transaction ID : SA11Ai-CN53013

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Johannessen, Lloyd, , ,

Mailing Address 11009 Algonquin Rd

City
Woodway

State
WA

Zip Code
98020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2018

Transaction ID : SA11Ai-CN52971

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kerr, Graham, , ,

Mailing Address 18564 Casade View Drive

City

Mount Vernon

State

WA

Zip Code

98274

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA11Ai-CN62133

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kortas, Amanda, , ,

Mailing Address 2526 W 31st St S Apt 131

City

Wichita

State

KS

Zip Code

67217

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Homemaker

Occupation (for Individual)

Homemaker

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA11Ai-CN60113

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kuettner, Carol L, , ,

Mailing Address 4936 Birch Lake Cir

City

Saint Paul

State

MN

Zip Code

55110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA11Ai-CN61002

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Laton, Dana, , ,

Mailing Address 1408 S 36th Ave

City
Yakima

State
WA

Zip Code
98902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
self employed

Occupation (for Individual)
self employed

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 20 / 2018

Transaction ID : SA11Ai-CN73165

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Martin, Cynthia A, , ,

Mailing Address 7103 Sedona Hls

City
Houston

State
TX

Zip Code
77069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA11Ai-CN60419

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McIntosh, Dennis R, , ,

Mailing Address 2266 Baxter St

City
Los Angeles

State
CA

Zip Code
90039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA11Ai-CN61218

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Moniz, Rosie, , ,

Mailing Address 39120 Argonaut Way # 260

City
Fremont

State
CA

Zip Code
94538

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

Rosie's Tours

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

05 / 23 / 2018

Transaction ID : SA11Ai-CN59137

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Monroe, Daniel A, , ,

Mailing Address 2323 Charlestown Pike Lot 65

City

Jeffersonville

State

IN

Zip Code

47130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

N/A

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 24 / 2018

Transaction ID : SA11Ai-CN56859

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Navasanian, N, , ,

Mailing Address 18822 Bermuda St

City

Porter Ranch

State

CA

Zip Code

91326

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

UNAVAILABLE

Occupation (for Individual)

UNAVAILABLE

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 21 / 2018

Transaction ID : SA11Ai-CN67178

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Neufeld, Carl R, , ,

Mailing Address 6342 Highgate Ln

City
DallasState
TXZip Code
75214FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TeacherOccupation (for Individual)
Southern Methodist University

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA11Ai-CN62323

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Peace, Sandra, , ,

Mailing Address 9147 Piccadilly Cir

City
WindsorState
CAZip Code
95492FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RNOccupation (for Individual)
SUTTER

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 23 / 2018

Transaction ID : SA11Ai-CN71884

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ray, Mary S., , ,

Mailing Address 4600 10th St Apt 216

City
MarreroState
LAZip Code
70072FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 11 / 2018

Transaction ID : SA11Ai-CN7142

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1000.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reynolds, Shelley S, , ,

Mailing Address 20342 N 110th Ln

City
Sun CityState
AZZip Code
85373FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2018

Transaction ID : SA11Ai-CN53180

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ryan, Richard P, , ,

Mailing Address 148 Highland St

City
WestonState
MAZip Code
2493FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2018

Transaction ID : SA11Ai-CN63961

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Santamaria, Ileana, , ,

Mailing Address 5611 Silverthorn Glen Dr

City
SpringState
TXZip Code
77379FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA11Ai-CN62067

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

1000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sina, Bernice, , ,

Mailing Address 238 Mill St

City

Campbellsport

State

WI

Zip Code

53010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

DISABLED

Occupation (for Individual)

DISABLED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA11Ai-CN60404

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stanford, Charles, , ,

Mailing Address PO Box 9025

City

Verhalen

State

TX

Zip Code

79772

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RANCHER

Occupation (for Individual)

SELF EMPLOYED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 04 / 2018

Transaction ID : SA11Ai-CN7989

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stich, Timothy J, , ,

Mailing Address S42w32746 Gate Keeper Dr

City

Waukesha

State

WI

Zip Code

53189

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MATC

Occupation (for Individual)

TEACHER

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 20 / 2018

Transaction ID : SA11Ai-CN67817

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stoltzfus, Levi J, , ,

Mailing Address 5544 Strasburg Rd

City
GapState
PAZip Code
17527FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Construction WorkerOccupation (for Individual)
Foresight Builders

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA11Ai-CN58904

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Tinord, Marc J, , ,

Mailing Address 4923 Cresthaven Blvd

City

West Palm Beach

State

FL

Zip Code

33415

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Business OwnerOccupation (for Individual)
SELF EMPLOYED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA11Ai-CN60070

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vargas, Joe G, , ,

Mailing Address 6570 Fairview Rd

City

Hollister

State

CA

Zip Code

95023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA11Ai-CN60561

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

800.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weseloh, Debi, , ,

Mailing Address 2025 N York St

City
DenverState
COZip Code
80205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ross Management GroupOccupation (for Individual)
President

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA11Ai-CN60199

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Williams, James, , ,

Mailing Address 5003 Bordentown Ave Apt 1

City
Old BridgeState
NJZip Code
8857FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LINEMANOccupation (for Individual)
PFCNG

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 23 / 2018

Transaction ID : SA11Ai-CN11445

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Williams, Jonathan David, , ,

Mailing Address 2929 Shady Brook Ln

City
LincolntonState
NCZip Code
28092FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WorkerOccupation (for Individual)
Sweep All

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA11Ai-CN58903

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

800.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wolf, David, , ,

Mailing Address 212 W 4th St

City
East Greenville

State
PA

Zip Code
18041

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 25 / 2018

Transaction ID : SA11Ai-CN56180

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Youssef, Adel, , ,

Mailing Address 1622 E Market St

City
Warren

State
OH

Zip Code
44483

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gastroenterology Clinic

Occupation (for Individual)
Doctor

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2018

Transaction ID : SA11Ai-CN4588

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

14960.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San Jose

State
CA

Zip Code
95131

Purpose of Disbursement
PayPal fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 02 / 2018

FEC Identification Number

C

Transaction ID : SB21b-EX177

Amount of Each Disbursement this Period

19.10

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San Jose

State
CA

Zip Code
95131

Purpose of Disbursement
PayPal fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21b-EX46

Amount of Each Disbursement this Period

0.88

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San Jose

State
CA

Zip Code
95131

Purpose of Disbursement
PayPal fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21b-EX12

Amount of Each Disbursement this Period

5.54

PayPal fees

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.52

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX207

Amount of Each Disbursement this Period

20.00

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX133

Amount of Each Disbursement this Period

7.55

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX10:

Amount of Each Disbursement this Period

3.55

PayPal fees

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.10

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	26	<input type="checkbox"/>	27
<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Americans for Police and Trooper Safety

0.92

Memo Item

Diagram illustrating the segment patterns for the numbers 04, 11, and 2018 on a 16x16 LED display. The patterns are shown as binary strings (0s and 1s) above the respective numbers.

- 04:** M M (top segments), 04 (bottom segments)
- 11:** D D (top segments), 11 (bottom segments)
- 2018:** Y Y Y Y (top segments), 2018 (bottom segments)

2.00

□ Memo Item

3.24

□ Memo Item

6.16

[illegible]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX9

Amount of Each Disbursement this Period

- 0.88

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX10

Amount of Each Disbursement this Period

- 0.88

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX47

Amount of Each Disbursement this Period

0.88

PayPal fees

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

- 0.88

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX20

Amount of Each Disbursement this Period

20.00

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX48

Amount of Each Disbursement this Period

0.88

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX85

Amount of Each Disbursement this Period

2.47

PayPal fees

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

23.35

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX20

Amount of Each Disbursement this Period

20.00

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX220

Amount of Each Disbursement this Period

23.70

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX5

Amount of Each Disbursement this Period

- 1.16

PayPal fees

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

42.54

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX96

Amount of Each Disbursement this Period

2.77

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX116

Amount of Each Disbursement this Period

4.31

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX63

Amount of Each Disbursement this Period

1.39

PayPal fees

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8.47

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C

Transaction ID : SB21b-EX76

Amount of Each Disbursement this Period

2.00

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		04		2018

FEC Identification Number

C

Transaction ID : SB21b-EX64

Amount of Each Disbursement this Period

1.39

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		07		2018

FEC Identification Number

C

Transaction ID : SB21b-EX52

Amount of Each Disbursement this Period

0.92

PayPal fees

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.31

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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A. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX81

Amount of Each Disbursement this Period

2.31

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX65

Amount of Each Disbursement this Period

1.39

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX1

Amount of Each Disbursement this Period

- 1.32

PayPal fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2.38

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				1	1		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX56

Amount of Each Disbursement this Period

1.08

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				1	5		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX59

Amount of Each Disbursement this Period

1.32

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				1	5		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX211

Amount of Each Disbursement this Period

20.00

PayPal fees

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

22.40

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX11

Amount of Each Disbursement this Period

- 0.88

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX53

Amount of Each Disbursement this Period

0.92

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX99

Amount of Each Disbursement this Period

3.08

PayPal fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3.12

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	5				2	3						2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX49

Amount of Each Disbursement this Period

0.88

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	5				2	3						2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX106

Amount of Each Disbursement this Period

3.55

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	5				2	3						2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX21

Amount of Each Disbursement this Period

20.00

PayPal fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

24.43

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	5				2	9					2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX127

Amount of Each Disbursement this Period

6.02

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	6				0	1					2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX71

Amount of Each Disbursement this Period

1.84

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	6				0	4					2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX13:

Amount of Each Disbursement this Period

6.94

PayPal fees

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

14.80

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX97

Amount of Each Disbursement this Period

2.77

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX118

Amount of Each Disbursement this Period

4.79

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX72

Amount of Each Disbursement this Period

1.84

PayPal fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9.40

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX115

Amount of Each Disbursement this Period

5.08

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX100

Amount of Each Disbursement this Period

3.08

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX54

Amount of Each Disbursement this Period

0.92

PayPal fees

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

9.08

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX73

Amount of Each Disbursement this Period

1.84

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX102

Amount of Each Disbursement this Period

3.24

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX82

Amount of Each Disbursement this Period

2.31

PayPal fees

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7.39

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX112

Amount of Each Disbursement this Period

3.85

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX2

Amount of Each Disbursement this Period

- 1.32

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX95

Amount of Each Disbursement this Period

2.76

PayPal fees

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5.29

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	6				2	5						2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX60

Amount of Each Disbursement this Period

1.32

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	6				2	5						2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX137

Amount of Each Disbursement this Period

8.32

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	6				2	5						2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX21;

Amount of Each Disbursement this Period

20.00

PayPal fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

29.64

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX57

Amount of Each Disbursement this Period

1.08

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX115

Amount of Each Disbursement this Period

4.17

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Payal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX83

Amount of Each Disbursement this Period

2.31

PayPal fees

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7	5	6
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Paypal Merchant Processing

Mailing Address 2211 N First St

City
San JoseState
CAZip Code
95131Purpose of Disbursement
PayPal fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX74

Amount of Each Disbursement this Period

1.84

PayPal fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX321

Amount of Each Disbursement this Period

42.01

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX321

Amount of Each Disbursement this Period

48.09

Unified Payments processing fee

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

91.94

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX246

Amount of Each Disbursement this Period

26.27

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX495

Amount of Each Disbursement this Period

1131.54

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX141

Amount of Each Disbursement this Period

9.19

Unified Payments processing fee

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1167.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX357

Amount of Each Disbursement this Period

90.93

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX38

Amount of Each Disbursement this Period

0.40

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX21!

Amount of Each Disbursement this Period

23.68

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.01

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX316

Amount of Each Disbursement this Period

36.97

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX218

Amount of Each Disbursement this Period

23.23

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX36

Amount of Each Disbursement this Period

0.32

Unified Payments processing fee

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.52

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	0		2	0	1	8		

FEC Identification Number

C Transaction ID : SB21b-EX94

Amount of Each Disbursement this Period

2.75

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	1		2	0	1	8		

FEC Identification Number

C Transaction ID : SB21b-EX40

Amount of Each Disbursement this Period

0.55

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	1		2	0	1	8		

FEC Identification Number

C Transaction ID : SB21b-EX33

Amount of Each Disbursement this Period

55.76

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.06

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX17

Amount of Each Disbursement this Period

19.69

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX239

Amount of Each Disbursement this Period

25.53

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX31

Amount of Each Disbursement this Period

32.90

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

78.12

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 47 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		17		2018

FEC Identification Number

C Transaction ID : SB21b-EX87

Amount of Each Disbursement this Period

2.54

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		18		2018

FEC Identification Number

C Transaction ID : SB21b-EX240

Amount of Each Disbursement this Period

25.74

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		19		2018

FEC Identification Number

C Transaction ID : SB21b-EX38;

Amount of Each Disbursement this Period

210.40

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

238.68

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX375

Amount of Each Disbursement this Period

168.13

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX122

Amount of Each Disbursement this Period

5.45

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX171

Amount of Each Disbursement this Period

16.71

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

190.29

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX343

Amount of Each Disbursement this Period

64.68

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX371

Amount of Each Disbursement this Period

154.37

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX42

Amount of Each Disbursement this Period

0.67

Unified Payments processing fee

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

219.72

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX352

Amount of Each Disbursement this Period

80.59

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX350

Amount of Each Disbursement this Period

77.39

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX131

Amount of Each Disbursement this Period

6.35

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

164.33

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				3	0		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX462

Amount of Each Disbursement this Period

661.25

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				0	1		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX125

Amount of Each Disbursement this Period

5.60

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				0	2		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX39

Amount of Each Disbursement this Period

0.42

Unified Payments processing fee

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

667.27

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX355

Amount of Each Disbursement this Period

103.67

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX353

Amount of Each Disbursement this Period

83.91

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX171

Amount of Each Disbursement this Period

18.12

Unified Payments processing fee

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

205.70

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX345

Amount of Each Disbursement this Period

69.17

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX37

Amount of Each Disbursement this Period

0.34

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX171

Amount of Each Disbursement this Period

18.46

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

87.97

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				1	0		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX344

Amount of Each Disbursement this Period

65.21

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				1	1		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX342

Amount of Each Disbursement this Period

63.30

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				1	4		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX431

Amount of Each Disbursement this Period

467.80

Unified Payments processing fee

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

596.31

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX434

Amount of Each Disbursement this Period

457.54

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX442

Amount of Each Disbursement this Period

494.88

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX44

Amount of Each Disbursement this Period

490.80

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1443.22

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX43

Amount of Each Disbursement this Period

454.37

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX43

Amount of Each Disbursement this Period

0.69

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX45

Amount of Each Disbursement this Period

583.11

Unified Payments processing fee

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1038.17

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX402

Amount of Each Disbursement this Period

293.08

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX451

Amount of Each Disbursement this Period

563.07

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX41

Amount of Each Disbursement this Period

385.12

Unified Payments processing fee

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1241.27

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				2	5		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX43c

Amount of Each Disbursement this Period

 434.81

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				2	6		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX354

Amount of Each Disbursement this Period

 84.41

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				2	7		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX32

Amount of Each Disbursement this Period

 44.94

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 564.16

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX386

Amount of Each Disbursement this Period

221.16

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX418

Amount of Each Disbursement this Period

385.31

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX26

Amount of Each Disbursement this Period

0.02

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

606.49

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				3	0		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX50

Amount of Each Disbursement this Period

0.88

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				3	1		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX440

Amount of Each Disbursement this Period

489.34

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				3	1		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX52

Amount of Each Disbursement this Period

2539.08

Unified Payments processing fee

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3029.30

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2018

FEC Identification Number

C

Transaction ID : SB21b-EX425

Amount of Each Disbursement this Period

428.20

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2018

FEC Identification Number

C

Transaction ID : SB21b-EX450

Amount of Each Disbursement this Period

554.72

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2018

FEC Identification Number

C

Transaction ID : SB21b-EX41

Amount of Each Disbursement this Period

0.64

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

983.56

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX37C

Amount of Each Disbursement this Period

146.60

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX378

Amount of Each Disbursement this Period

183.99

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX38:

Amount of Each Disbursement this Period

220.85

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

551.44

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX44

Amount of Each Disbursement this Period

0.78

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX377

Amount of Each Disbursement this Period

180.48

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX33

Amount of Each Disbursement this Period

50.08

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

231.34

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 64 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				1	1		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX323

Amount of Each Disbursement this Period

42.86

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				1	2		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX335

Amount of Each Disbursement this Period

55.35

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				1	3		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX36

Amount of Each Disbursement this Period

130.96

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

229.17

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2018

FEC Identification Number

C

Transaction ID : SB21b-EX403

Amount of Each Disbursement this Period

342.47

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		15		2018

FEC Identification Number

C

Transaction ID : SB21b-EX403

Amount of Each Disbursement this Period

310.82

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		16		2018

FEC Identification Number

C

Transaction ID : SB21b-EX38

Amount of Each Disbursement this Period

238.13

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

891.42

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
06		17		2018

FEC Identification Number

C

Transaction ID : SB21b-EX37

Amount of Each Disbursement this Period

178.26

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
06		18		2018

FEC Identification Number

C

Transaction ID : SB21b-EX27

Amount of Each Disbursement this Period

0.02

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
06		18		2018

FEC Identification Number

C

Transaction ID : SB21b-EX42

Amount of Each Disbursement this Period

421.94

Unified Payments processing fee

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

600.22

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX47C

Amount of Each Disbursement this Period

 759.55

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX28

Amount of Each Disbursement this Period

 0.02

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX46

Amount of Each Disbursement this Period

 612.26

Unified Payments processing fee

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

 1371.83

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		21		2018

FEC Identification Number

C

Transaction ID : SB21b-EX454

Amount of Each Disbursement this Period

570.22

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		22		2018

FEC Identification Number

C

Transaction ID : SB21b-EX67

Amount of Each Disbursement this Period

1.67

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		22		2018

FEC Identification Number

C

Transaction ID : SB21b-EX44i

Amount of Each Disbursement this Period

549.08

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1120.97

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX38

Amount of Each Disbursement this Period

239.14

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX443

Amount of Each Disbursement this Period

495.74

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX43

Amount of Each Disbursement this Period

452.89

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1187.77

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 70 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2018

FEC Identification Number

C

Transaction ID : SB21b-EX422

Amount of Each Disbursement this Period

417.61

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2018

FEC Identification Number

C

Transaction ID : SB21b-EX439

Amount of Each Disbursement this Period

483.01

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2018

FEC Identification Number

C

Transaction ID : SB21b-EX58

Amount of Each Disbursement this Period

1.13

Unified Payments processing fee

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

901.75

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2018

FEC Identification Number

C

Transaction ID : SB21b-EX421

Amount of Each Disbursement this Period

407.60

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2018

FEC Identification Number

C

Transaction ID : SB21b-EX397

Amount of Each Disbursement this Period

276.36

Unified Payments processing fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Payments

Mailing Address 3363 NE 163rd Suite 705

City
North Miami BeachState
FLZip Code
33160Purpose of Disbursement
Unified Payments processing fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2018

FEC Identification Number

C

Transaction ID : SB21b-EX52

Amount of Each Disbursement this Period

3379.65

Unified Payments processing fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4063.61

X	21b		22		23		26		27
	28a		28b		28c		29		30b

Americans for Police and Trooper Safety

A. Stripe

003

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

C

9.19

Memo Item

B. Stripe

003

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) _____

C

12.86

Online Donation Fees

Memo Item

C. Stripe

003

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

C

8.16

Online Donation Fees

Memo Item

SUBTOTAL of Disbursements This Page (optional).....

30.21

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX164

Amount of Each Disbursement this Period

12.25

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX89

Amount of Each Disbursement this Period

2.72

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX12:

Amount of Each Disbursement this Period

6.09

Online Donation Fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

21.06

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	0		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX61

Amount of Each Disbursement this Period

1.34

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	1		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX103

Amount of Each Disbursement this Period

3.36

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	2		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX77

Amount of Each Disbursement this Period

2.03

Online Donation Fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6.73

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 75 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX108

Amount of Each Disbursement this Period

3.75

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX109

Amount of Each Disbursement this Period

3.75

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX90

Amount of Each Disbursement this Period

2.72

Online Donation Fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10.22

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX12

Amount of Each Disbursement this Period

5.48

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX91

Amount of Each Disbursement this Period

2.72

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX10

Amount of Each Disbursement this Period

3.36

Online Donation Fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11.56

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 77 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX92

Amount of Each Disbursement this Period

2.72

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX84

Amount of Each Disbursement this Period

2.37

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX111

Amount of Each Disbursement this Period

3.75

Online Donation Fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8.84

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX12c

Amount of Each Disbursement this Period

5.09

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX68

Amount of Each Disbursement this Period

1.68

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX93

Amount of Each Disbursement this Period

2.72

Online Donation Fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9.49

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 79 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX111

Amount of Each Disbursement this Period

3.75

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX78

Amount of Each Disbursement this Period

2.03

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX69

Amount of Each Disbursement this Period

1.68

Online Donation Fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7.46

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 80 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX121

Amount of Each Disbursement this Period

5.39

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX62

Amount of Each Disbursement this Period

1.34

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX79

Amount of Each Disbursement this Period

2.03

Online Donation Fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8.76

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 81 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX86

Amount of Each Disbursement this Period

2.51

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX126

Amount of Each Disbursement this Period

5.78

Online Donation Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 185 Berry St Ste 550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online Donation Fees

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX70

Amount of Each Disbursement this Period

1.71

Online Donation Fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10.00

X	21b		22		23		26		27
	28a		28b		28c		29		30b

Americans for Police and Trooper Safety

9.84

Memo Item

MM / DD / YYYY

8.15

 McGraw-Hill

24.00

Memo Item

41.99

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 83 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX504

Amount of Each Disbursement this Period

1666.80

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX272

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX27:

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1726.80

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 84 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX274

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX233

Amount of Each Disbursement this Period

24.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX274

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.00

X	21b		22		23		26		27
	28a		28b		28c		29		30b

Americans for Police and Trooper Safety

A. Bank of America

Date of Disbursement

003

Category/
Type

☐ Primary ☐ General
☐ Other (specify) ▼

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Bank fees

Memo Item

B. Bank of America

Date of Disbursement

M M / D D / Y Y Y Y
04 12 2018

003

Category/
Type

☐ Primary ☐ General
☐ Other (specify) _____

District:

FEC Identification Number

C							
---	--	--	--	--	--	--	--

Transaction ID : SB21b-EX277

Amount of Each Disbursement this Period

30.00

Bank fees

Memo Item

C. Bank of America

Date of Disbursement

003

Category/
Type

☐ Primary ☐ General
☐ Other (specify) ▼

District:

FEC Identification Number

C

Transaction ID : SB21b-EX15

Amount of Each Disbursement this Period

12.00

Bank fees

Memo Item

SUBTOTAL of Disbursements This Page (optional).....

A diagram showing a rectangular area with a length of 72.00 units. The rectangle is outlined in black, and the number 72.00 is written inside the rectangle on the right side.

TOTAL This Period (last page this line number only).....

[illegible]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 86 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX153

Amount of Each Disbursement this Period

12.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX154

Amount of Each Disbursement this Period

12.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX271

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 87 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX275

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX280

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX151

Amount of Each Disbursement this Period

12.00

Bank fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 88 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX314

Amount of Each Disbursement this Period

36.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX156

Amount of Each Disbursement this Period

12.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX28

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

78.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 89 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX282

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX283

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX15

Amount of Each Disbursement this Period

12.00

Bank fees

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.00

X	21b		22		23		26		27
	28a		28b		28c		29		30b

Americans for Police and Trooper Safety

A. Bank of America

003

Category/
Type

District:

C

30.00

Memo Item

B. Bank of America

MM / DD / YYYY

003

Category/
Type

District:

C							
---	--	--	--	--	--	--	--

30.00

Memo Item

C. Bank of America

003

Category/
Type

District:

C

30.00

Memo Item

90.00

[illegible]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 91 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C

Transaction ID : SB21b-EX234

Amount of Each Disbursement this Period

24.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		04		2018

FEC Identification Number

C

Transaction ID : SB21b-EX158

Amount of Each Disbursement this Period

12.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		09		2018

FEC Identification Number

C

Transaction ID : SB21b-EX28

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66.00

--

X	21b		22		23		26		27
	28a		28b		28c		29		30b

Americans for Police and Trooper Safety

A. Bank of America

C

Category/
Type

30.00

Memo Item

B. Bank of America

MM / DD / YYYY

C

Category/
Type

30.00

Memo Item

C. Bank of America

C

Category/
Type

A horizontal number line with 10 tick marks. The rightmost tick mark is labeled 30.00.

Memo Item

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 93 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		16		2018

FEC Identification Number

C

Transaction ID : SB21b-EX291

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		16		2018

FEC Identification Number

C

Transaction ID : SB21b-EX292

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		17		2018

FEC Identification Number

C

Transaction ID : SB21b-EX151

Amount of Each Disbursement this Period

12.00

Bank fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 94 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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A. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX315

Amount of Each Disbursement this Period

36.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX293

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX29

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.00

X	21b		22		23		26		27
	28a		28b		28c		29		30b

Americans for Police and Trooper Safety

A. Bank of America



C

Category/
Type

30.00

Memo Item

B. Bank of America

FEC Identification Number

C

Amount of Each Disbursement this Period

Category/
Type

30.00

 McGraw-Hill

C. Bank of America

Three digital displays are shown, each with a row of small gray squares above the main display area. The first display shows '06' with two squares above it. The second display shows '01' with two squares above it. The third display shows '2018' with four squares above it.

FEC Identification Number

[illegible]

Amount of Each Disbursement this Period

Category/
Type

243.00

Memo Item

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 97 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	06	/	2018

FEC Identification Number

C

Transaction ID : SB21b-EX295

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	06	/	2018

FEC Identification Number

C

Transaction ID : SB21b-EX300

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	06	/	2018

FEC Identification Number

C

Transaction ID : SB21b-EX300

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 98 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX167

Amount of Each Disbursement this Period

15.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX302

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX231

Amount of Each Disbursement this Period

24.00

Bank fees

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

69.00

X	21b		22		23		26		27
	28a		28b		28c		29		30b

Americans for Police and Trooper Safety

A. Bank of America

Zip Code
33622

003

Category/
Type

☐ Primary ☐ General
☐ Other (specify) ▼

District:

C

30.00

Memo Item

B. Bank of America

MM / DD / YYYY

Zip Code
33622

003

Category/
Type

☐ Primary ☐ General
☐ Other (specify) _____

District:

C

30.00

Memo Item

C. Bank of America

Zip Code
33622

003

Category/
Type

☐ Primary ☐ General
☐ Other (specify) ▼

District:

C

30.00

Memo Item

90.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 100 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX161

Amount of Each Disbursement this Period

12.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX306

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX307

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 101 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		20		2018

FEC Identification Number

C

Transaction ID : SB21b-EX306

Amount of Each Disbursement this Period

30.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		21		2018

FEC Identification Number

C

Transaction ID : SB21b-EX162

Amount of Each Disbursement this Period

12.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		22		2018

FEC Identification Number

C

Transaction ID : SB21b-EX16:

Amount of Each Disbursement this Period

12.00

Bank fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

54.00

X	21b		22		23		26		27
	28a		28b		28c		29		30b

Americans for Police and Trooper Safety

A. Bank of America

003

Category/
Type

District:

C

30.00

Memo Item

B. Bank of America

003

Category/
Type

District:

C

30.00

Memo Item

C. Bank of America

003

Category/
Type

District:

C

30.00

Memo Item

90.00



**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 103 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX236

Amount of Each Disbursement this Period

24.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 25118

City
TampaState
FLZip Code
33622Purpose of Disbursement
Bank fees

003

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX173

Amount of Each Disbursement this Period

17.00

Bank fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America Merchant Services

Mailing Address 755 W Channel Islands Blvd

City
Port HuenemeState
CAZip Code
93041Purpose of Disbursement
Bank of America processing fees

003

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX24

Amount of Each Disbursement this Period

25.95

Bank of America processing fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

66.95

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 104 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City
San FranciscoState
CAZip Code
94128Purpose of Disbursement
Authorize.net gateway fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		03		2018

FEC Identification Number

C

Transaction ID : SB21b-EX365

Amount of Each Disbursement this Period

120.35

Authorize.net gateway fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City
San FranciscoState
CAZip Code
94128Purpose of Disbursement
Authorize.net gateway fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2018

FEC Identification Number

C

Transaction ID : SB21b-EX360

Amount of Each Disbursement this Period

106.65

Authorize.net gateway fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City
San FranciscoState
CAZip Code
94128Purpose of Disbursement
Authorize.net gateway fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2018

FEC Identification Number

C

Transaction ID : SB21b-EX421

Amount of Each Disbursement this Period

426.40

Authorize.net gateway fee

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

653.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 105 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City
San FranciscoState
CAZip Code
94128Purpose of Disbursement
Authorize.net gateway fee

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX456

Amount of Each Disbursement this Period

581.60

Authorize.net gateway fee

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Meisner, Kristina, , ,

Mailing Address 408 South Cochran Ave #203

City
Los AngelesState
CAZip Code
90036Purpose of Disbursement
Administrative Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX471

Amount of Each Disbursement this Period

800.00

Administrative Services

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Meisner, Kristina, , ,

Mailing Address 408 South Cochran Ave #203

City
Los AngelesState
CAZip Code
90036Purpose of Disbursement
Administrative Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX38:

Amount of Each Disbursement this Period

217.00

Administrative Services

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1598.60

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 106 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Meisner, Kristina, , ,

Mailing Address 408 South Cochran Ave #203

City
Los AngelesState
CAZip Code
90036Purpose of Disbursement
Administrative Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX415

Amount of Each Disbursement this Period

[REDACTED] 400.00

Administrative Services

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Meisner, Kristina, , ,

Mailing Address 408 South Cochran Ave #203

City
Los AngelesState
CAZip Code
90036Purpose of Disbursement
Administrative Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		18		2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX453

Amount of Each Disbursement this Period

[REDACTED] 570.00

Administrative Services

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Catur Consulting

Mailing Address 5090 Barrington Circle

City
SarasotaState
FLZip Code
34234Purpose of Disbursement
Compliance Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX47

Amount of Each Disbursement this Period

[REDACTED] 900.00

Compliance Services

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

[REDACTED] 1870.00

[REDACTED]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 107 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Button Pusher Productions

Mailing Address 509 E Via Colusa

City
Palm SpringsState
CAZip Code
92262Purpose of Disbursement
Media Consulting

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX545

Amount of Each Disbursement this Period

10000.00

Media Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Button Pusher Productions

Mailing Address 509 E Via Colusa

City
Palm SpringsState
CAZip Code
92262Purpose of Disbursement
Media Consulting

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX546

Amount of Each Disbursement this Period

10000.00

Media Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Button Pusher Productions

Mailing Address 509 E Via Colusa

City
Palm SpringsState
CAZip Code
92262Purpose of Disbursement
Media Consulting

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX53:

Amount of Each Disbursement this Period

5000.00

Media Consulting

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

25000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 108 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Button Pusher Productions

Mailing Address 509 E Via Colusa

City
Palm SpringsState
CAZip Code
92262Purpose of Disbursement
Media Consulting

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX547

Amount of Each Disbursement this Period

10000.00

Media Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Button Pusher Productions

Mailing Address 509 E Via Colusa

City
Palm SpringsState
CAZip Code
92262Purpose of Disbursement
Media Consulting

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX548

Amount of Each Disbursement this Period

10000.00

Media Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Button Pusher Productions

Mailing Address 509 E Via Colusa

City
Palm SpringsState
CAZip Code
92262Purpose of Disbursement
Media Consulting

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX56:

Amount of Each Disbursement this Period

20000.00

Media Consulting

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

40000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 109 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Dierks, David, , ,

Mailing Address 509 Altair Place

City
VeniceState
CAZip Code
90291Purpose of Disbursement
Research Consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX48:

Amount of Each Disbursement this Period

1000.00

Research Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Dierks, David, , ,

Mailing Address 509 Altair Place

City
VeniceState
CAZip Code
90291Purpose of Disbursement
Research Consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	0		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX48:

Amount of Each Disbursement this Period

1000.00

Research Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dierks, David, , ,

Mailing Address 509 Altair Place

City
VeniceState
CAZip Code
90291Purpose of Disbursement
Research Consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	6		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX48:

Amount of Each Disbursement this Period

1000.00

Research Consulting

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 110 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Dierks, David, , ,

Mailing Address 509 Altair Place

City
VeniceState
CAZip Code
90291Purpose of Disbursement
Research Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		25		2018

FEC Identification Number

C

Transaction ID : SB21b-EX486

Amount of Each Disbursement this Period

1000.00

Research Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Dierks, David, , ,

Mailing Address 509 Altair Place

City
VeniceState
CAZip Code
90291Purpose of Disbursement
Research Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2018

FEC Identification Number

C

Transaction ID : SB21b-EX487

Amount of Each Disbursement this Period

1000.00

Research Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dierks, David, , ,

Mailing Address 509 Altair Place

City
VeniceState
CAZip Code
90291Purpose of Disbursement
Research Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2018

FEC Identification Number

C

Transaction ID : SB21b-EX488

Amount of Each Disbursement this Period

1000.00

Research Consulting

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 111 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Dierks, David, , ,

Mailing Address 509 Altair Place

City
VeniceState
CAZip Code
90291Purpose of Disbursement
Research Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2018

FEC Identification Number

C Transaction ID : SB21b-EX488

Amount of Each Disbursement this Period

1000.00

Research Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Dierks, David, , ,

Mailing Address 509 Altair Place

City
VeniceState
CAZip Code
90291Purpose of Disbursement
Research Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2018

FEC Identification Number

C Transaction ID : SB21b-EX490

Amount of Each Disbursement this Period

1000.00

Research Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dierks, David, , ,

Mailing Address 509 Altair Place

City
VeniceState
CAZip Code
90291Purpose of Disbursement
Research Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		29		2018

FEC Identification Number

C Transaction ID : SB21b-EX49

Amount of Each Disbursement this Period

1000.00

Research Consulting

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 112 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Dierks, David, , ,

Mailing Address 509 Altair Place

City
VeniceState
CAZip Code
90291Purpose of Disbursement
Research Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2018

FEC Identification Number

C

Transaction ID : SB21b-EX492

Amount of Each Disbursement this Period

1000.00

Research Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Dierks, David, , ,

Mailing Address 509 Altair Place

City
VeniceState
CAZip Code
90291Purpose of Disbursement
Research Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2018

FEC Identification Number

C

Transaction ID : SB21b-EX493

Amount of Each Disbursement this Period

1000.00

Research Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dierks, David, , ,

Mailing Address 509 Altair Place

City
VeniceState
CAZip Code
90291Purpose of Disbursement
Research Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		21		2018

FEC Identification Number

C

Transaction ID : SB21b-EX501

Amount of Each Disbursement this Period

2000.00

Research Consulting

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 113 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Kutac, Paul D., , ,

Mailing Address 624 N Roxbury Drive

City
Beverly HillsState
CAZip Code
90210Purpose of Disbursement
Accounting Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX507

Amount of Each Disbursement this Period

2000.00

Accounting Services

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Phillip Leconte Photography

Mailing Address 1104 West 7th Street

City
AustinState
TXZip Code
78703Purpose of Disbursement
Internet Consulting

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX521

Amount of Each Disbursement this Period

2500.00

Internet Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Phillip Leconte Photography

Mailing Address 1104 West 7th Street

City
AustinState
TXZip Code
78703Purpose of Disbursement
Internet Consulting

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX52:

Amount of Each Disbursement this Period

2500.00

Internet Consulting

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 114 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Phillip Leconte Photography

Mailing Address 1104 West 7th Street

City
AustinState
TXZip Code
78703Purpose of Disbursement
Internet Consulting

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		19		2018

FEC Identification Number

C

Transaction ID : SB21b-EX523

Amount of Each Disbursement this Period

2500.00

Internet Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Phillip Leconte Photography

Mailing Address 1104 West 7th Street

City
AustinState
TXZip Code
78703Purpose of Disbursement
Internet Consulting

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		25		2018

FEC Identification Number

C

Transaction ID : SB21b-EX524

Amount of Each Disbursement this Period

2500.00

Internet Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Phillip Leconte Photography

Mailing Address 1104 West 7th Street

City
AustinState
TXZip Code
78703Purpose of Disbursement
Internet Consulting

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C

Transaction ID : SB21b-EX525

Amount of Each Disbursement this Period

2500.00

Internet Consulting

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 115 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Phillip Leconte Photography

Mailing Address 1104 West 7th Street

City
AustinState
TXZip Code
78703Purpose of Disbursement
Internet Consulting

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX526

Amount of Each Disbursement this Period

2500.00

Internet Consulting

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Data Services LLC

Mailing Address 1350 W Southport Rd Box 130

City
IndianapolisState
INZip Code
46217Purpose of Disbursement
Database services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX552

Amount of Each Disbursement this Period

11446.50

Database services

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Data Services LLC

Mailing Address 1350 W Southport Rd Box 130

City
IndianapolisState
INZip Code
46217Purpose of Disbursement
Database services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX54

Amount of Each Disbursement this Period

8853.00

Database services

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

22799.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 116 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Data Services LLC

Mailing Address 1350 W Southport Rd Box 130

City
IndianapolisState
INZip Code
46217Purpose of Disbursement
Database services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX537

Amount of Each Disbursement this Period

6922.50

Database services

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Data Services LLC

Mailing Address 1350 W Southport Rd Box 130

City
IndianapolisState
INZip Code
46217Purpose of Disbursement
Database services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX537

Amount of Each Disbursement this Period

5421.00

Database services

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Data Services LLC

Mailing Address 1350 W Southport Rd Box 130

City
IndianapolisState
INZip Code
46217Purpose of Disbursement
Database services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX537

Amount of Each Disbursement this Period

5167.50

Database services

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

17511.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 117 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Data Services LLC

Mailing Address 1350 W Southport Rd Box 130

City
IndianapolisState
INZip Code
46217Purpose of Disbursement
Database services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX52

Amount of Each Disbursement this Period

2831.40

Database services

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Data Services LLC

Mailing Address 1350 W Southport Rd Box 130

City
IndianapolisState
INZip Code
46217Purpose of Disbursement
Database services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX53

Amount of Each Disbursement this Period

4087.20

Database services

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Data Services LLC

Mailing Address 1350 W Southport Rd Box 130

City
IndianapolisState
INZip Code
46217Purpose of Disbursement
Database services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX55

Amount of Each Disbursement this Period

12948.00

Database services

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

19866.60

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 118 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Data Services LLC

Mailing Address 1350 W Southport Rd Box 130

City
IndianapolisState
INZip Code
46217Purpose of Disbursement
Database services

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				3	1				2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX562

Amount of Each Disbursement this Period

16239.60

Database services

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Data Services LLC

Mailing Address 1350 W Southport Rd Box 130

City
IndianapolisState
INZip Code
46217Purpose of Disbursement
Database services

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				0	6				2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX561

Amount of Each Disbursement this Period

16146.00

Database services

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Data Services LLC

Mailing Address 1350 W Southport Rd Box 130

City
IndianapolisState
INZip Code
46217Purpose of Disbursement
Database services

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				1	4				2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX55:

Amount of Each Disbursement this Period

13934.70

Database services

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

46320.30

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 119 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Unified Data Services LLC

Mailing Address 1350 W Southport Rd Box 130

City
IndianapolisState
INZip Code
46217Purpose of Disbursement
Database services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
06		20		2018

FEC Identification Number

C

Transaction ID : SB21b-EX545

Amount of Each Disbursement this Period

10194.60

Database services

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Data Services LLC

Mailing Address 1350 W Southport Rd Box 130

City
IndianapolisState
INZip Code
46217Purpose of Disbursement
Database services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
06		27		2018

FEC Identification Number

C

Transaction ID : SB21b-EX568

Amount of Each Disbursement this Period

22120.80

Database services

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. West Seventh

Mailing Address 1104 West 7th Street

City
AustinState
TXZip Code
78703Purpose of Disbursement
Internet Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
06		08		2018

FEC Identification Number

C

Transaction ID : SB21b-EX531

Amount of Each Disbursement this Period

5000.00

Internet Consulting

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

37315.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 120 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. American Technology Services LLC

Mailing Address 125 N 2nd St Unit 110 Box 241

City
PhoenixState
AZZip Code
85250Purpose of Disbursement
Technical/Computer Support

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX571

Amount of Each Disbursement this Period

23653.28

Technical/Computer Support

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Technology Services LLC

Mailing Address 125 N 2nd St Unit 110 Box 241

City
PhoenixState
AZZip Code
85250Purpose of Disbursement
Technical/Computer Support

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX564

Amount of Each Disbursement this Period

18294.72

Technical/Computer Support

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Technology Services LLC

Mailing Address 125 N 2nd St Unit 110 Box 241

City
PhoenixState
AZZip Code
85250Purpose of Disbursement
Technical/Computer Support

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX551

Amount of Each Disbursement this Period

14303.84

Technical/Computer Support

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

56251.84

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 121 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. American Technology Services LLC

Mailing Address 125 N 2nd St Unit 110 Box 241

City
PhoenixState
AZZip Code
85250Purpose of Disbursement
Technical/Computer Support

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				2	5				2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX551

Amount of Each Disbursement this Period

11207.04

Technical/Computer Support

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Technology Services LLC

Mailing Address 125 N 2nd St Unit 110 Box 241

City
PhoenixState
AZZip Code
85250Purpose of Disbursement
Technical/Computer Support

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				0	2				2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX550

Amount of Each Disbursement this Period

10682.24

Technical/Computer Support

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Technology Services LLC

Mailing Address 125 N 2nd St Unit 110 Box 241

City
PhoenixState
AZZip Code
85250Purpose of Disbursement
Technical/Computer Support

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				0	9				2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX531

Amount of Each Disbursement this Period

5853.28

Technical/Computer Support

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

27742.56

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 122 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. American Technology Services LLC

Mailing Address 125 N 2nd St Unit 110 Box 241

City
PhoenixState
AZZip Code
85250Purpose of Disbursement
Technical/Computer Support

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX541

Amount of Each Disbursement this Period

8445.44

Technical/Computer Support

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Technology Services LLC

Mailing Address 125 N 2nd St Unit 110 Box 241

City
PhoenixState
AZZip Code
85250Purpose of Disbursement
Technical/Computer Support

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX574

Amount of Each Disbursement this Period

26755.36

Technical/Computer Support

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Technology Services LLC

Mailing Address 125 N 2nd St Unit 110 Box 241

City
PhoenixState
AZZip Code
85250Purpose of Disbursement
Technical/Computer Support

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX58

Amount of Each Disbursement this Period

33559.20

Technical/Computer Support

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

68760.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 123 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. American Technology Services LLC

Mailing Address 125 N 2nd St Unit 110 Box 241

City
PhoenixState
AZZip Code
85250Purpose of Disbursement
Technical/Computer Support

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	6			2	0	1	8		

FEC Identification Number

C Transaction ID : SB21b-EX58c

Amount of Each Disbursement this Period

33365.92

Technical/Computer Support

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Technology Services LLC

Mailing Address 125 N 2nd St Unit 110 Box 241

City
PhoenixState
AZZip Code
85250Purpose of Disbursement
Technical/Computer Support

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	4			2	0	1	8		

FEC Identification Number

C Transaction ID : SB21b-EX575

Amount of Each Disbursement this Period

28800.00

Technical/Computer Support

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Technology Services LLC

Mailing Address 125 N 2nd St Unit 110 Box 241

City
PhoenixState
AZZip Code
85250Purpose of Disbursement
Technical/Computer Support

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	0			2	0	1	8		

FEC Identification Number

C Transaction ID : SB21b-EX56

Amount of Each Disbursement this Period

21065.98

Technical/Computer Support

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83231.90

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 124 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. American Technology Services LLC

Mailing Address 125 N 2nd St Unit 110 Box 241

City
PhoenixState
AZZip Code
85250Purpose of Disbursement
Technical/Computer Support

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				2	7				2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX587

Amount of Each Disbursement this Period

45723.36

Technical/Computer Support

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Compliance Consultants LLC

Mailing Address 1345 N Jefferson St #454

City
MilwaukeeState
WIZip Code
53202Purpose of Disbursement
Compliance Services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				0	4				2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX582

Amount of Each Disbursement this Period

33572.42

Compliance Services

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Compliance Consultants LLC

Mailing Address 1345 N Jefferson St #454

City
MilwaukeeState
WIZip Code
53202Purpose of Disbursement
Compliance Services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	2				2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX57:

Amount of Each Disbursement this Period

25966.61

Compliance Services

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105262.39

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 125 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Compliance Consultants LLC

Mailing Address 1345 N Jefferson St #454

City
MilwaukeeState
WIZip Code
53202Purpose of Disbursement
Compliance Services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX566

Amount of Each Disbursement this Period

20302.29

Compliance Services

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Compliance Consultants LLC

Mailing Address 1345 N Jefferson St #454

City
MilwaukeeState
WIZip Code
53202Purpose of Disbursement
Compliance Services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX560

Amount of Each Disbursement this Period

15906.77

Compliance Services

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Compliance Consultants LLC

Mailing Address 1345 N Jefferson St #454

City
MilwaukeeState
WIZip Code
53202Purpose of Disbursement
Compliance Services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX551

Amount of Each Disbursement this Period

15161.88

Compliance Services

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51370.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 126 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Compliance Consultants LLC

Mailing Address 1345 N Jefferson St #454

City
MilwaukeeState
WIZip Code
53202Purpose of Disbursement
Compliance Services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX54c

Amount of Each Disbursement this Period

8307.77

Compliance Services

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Compliance Consultants LLC

Mailing Address 1345 N Jefferson St #454

City
MilwaukeeState
WIZip Code
53202Purpose of Disbursement
Compliance Services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX553

Amount of Each Disbursement this Period

11987.02

Compliance Services

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Compliance Consultants LLC

Mailing Address 1345 N Jefferson St #454

City
MilwaukeeState
WIZip Code
53202Purpose of Disbursement
Compliance Services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX58

Amount of Each Disbursement this Period

37975.43

Compliance Services

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

58270.22

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 127 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Compliance Consultants LLC

Mailing Address 1345 N Jefferson St #454

City
MilwaukeeState
WIZip Code
53202Purpose of Disbursement
Compliance Services

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				3	1				2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX591

Amount of Each Disbursement this Period

47632.41

Compliance Services

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Compliance Consultants LLC

Mailing Address 1345 N Jefferson St #454

City
MilwaukeeState
WIZip Code
53202Purpose of Disbursement
Compliance Services

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				0	6				2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX590

Amount of Each Disbursement this Period

47358.07

Compliance Services

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Compliance Consultants LLC

Mailing Address 1345 N Jefferson St #454

City
MilwaukeeState
WIZip Code
53202Purpose of Disbursement
Compliance Services

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				1	4				2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX58:

Amount of Each Disbursement this Period

40870.96

Compliance Services

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

135861.44

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 128 OF 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americans for Police and Trooper Safety

Full Name (Last, First, Middle Initial)

A. Compliance Consultants LLC

Mailing Address 1345 N Jefferson St #454

City
MilwaukeeState
WIZip Code
53202Purpose of Disbursement
Compliance Services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX576

Amount of Each Disbursement this Period

29900.21

Compliance Services

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Compliance Consultants LLC

Mailing Address 1345 N Jefferson St #454

City
MilwaukeeState
WIZip Code
53202Purpose of Disbursement
Compliance Services

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21b-EX595

Amount of Each Disbursement this Period

64897.69

Compliance Services

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

94797.90

TOTAL This Period (last page this line number only)..... ►

949903.73

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 129 OF 129
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Americans for Police and Trooper Safety	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00656314 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	

Full Name of Payee <input type="checkbox"/> Memo Item North Star Multimedia			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	
Mailing Address 9360 W. Flamingo #110-226			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05 / 17 / 2018</div>	
City Las Vegas	State NV	Zip Code 89147	Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">5000.00</div>	
Purpose of Expenditure Political Advertising Michele Mortensen		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">004</div>	Transaction ID : SE24-EXP534 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	
Name of Federal Candidate: Mortensen, Michelle, ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">5000.00</div>	
			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ►	

Full Name of Payee <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	
Mailing Address			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	
City	State	Zip Code	Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	
Purpose of Expenditure		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	
Name of Federal Candidate:			<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	
			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">5000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
(c) TOTAL Independent Expenditures	▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">5000.00</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kutac, Paul, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature